Permit No.	City of Canton				
Building Permit Application					
		Permit Type			
Job Address		Zoning			
Commercial Project New ☐ Remodel ☐		Residential Project New Remodel			
Sq Ft of Project		Value of work			
Description of work					
All questions must be answer misinformation is provided.	red in a truthful manner. T	he permit is subjec	t to bein	g denied	if any
1 All setbacks are in co	Yes □	No	o 🗆	N/A □	
2 All deed restrictions	Yes □	No	o 🗆	N/A □	
3 All HOA covenants a	Yes □	No	o 🗆	N/A □	
4 All easements are in compliance?		Yes □	No	o 🗆	N/A □
5 Are 2 sets of plans attached?		Yes □	No	o 🗆	N/A □
Property Owner Phone No.					
Address					
City	State		Zip		
Contractor	Phone No.	Phone No.			
Address	<u>.</u>				
City	State		Zip		
Project Contact Phone No.					
Subcontractors (each sub must pull their own trade permit)					
Electrical					
Mechanical					
Plumbing					
I hereby certify that I have read this application and filled all information required by the City of Canton. I understand that all work will be performed in compliance with the current ICC code series, ordinances and laws					
adopted by the City of Canton, Van Zandt County, and the State of Texas. I also acknowledge that the City of Canton or its authorized agent is not responsible or liable for verification of information or enforcing deed					
restrictions, covenants or homeowner association requirements. I, as the owner or an authorized agent of the					
owner, will allow the City Manager or his authorized agent access to perform inspections during normal					
working.					
Signature of Contractor or authorized agent Date					
Accepted By		Approved By			
Plan Review Fee		Permit Fee			
Registration Fee		Balance Due			

Payment Method

Cash CC

Amount Pd

CK

^{**}Building Permit expires 180 days from issue. Inspection requests are to be called into 903-567-1841 and must have at least 24 hours notice.**